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Health Finance and Policy Committee Minnesota House 75 Rev. Dr. Martin Luther King Jr. Blvd. St. Paul, MN 55155

Chair Liebling and Committee members,

The Department of Human Services (DHS) proposal to carve out dental claims repeals the existing enhancements received by safety net dental providers in favor of an across-the-board rate increase available to all dental offices, regardless of their overall commitment to the Medicaid population. It would also establish a single administrator to handle and pay for all dental claims for state public programs (SPP) enrollees.

We write to oppose this proposal, which is one of several carve-outs being proposed by DHS:

- Patients will lose connection to medical care unless the chosen administrator can coordinate
 care with the health plan through which the enrollee receives the rest of their care for services
 like transportation and interpreters. We do not believe that further dividing enrollee's health
 care into silos at DHS is going to improve patient care. We also echo this concern with the
 pharmacy and NEMT carve outs.
- Contracting with a new entity to manage all dental care (currently Managed Care Organizations (MCO) do it as part of the capitated rate) will be a significant change in DHS and would require substantial new resources from the state.
- Nothing in this proposal moves dental care away from volume and towards a model that rewards outcomes.
- A single administrator (as noted by DHS in a previous report as well as in the 2013 OLA report)
 will likely not pay dentists as much to treat SPP enrollees as they currently receive through MCO
 capitated rates, meaning that dentists will be less likely to see them. According to its own data,
 the payer with the worst access problems, and lowest payment rates, is DHS itself.
- All of our plans who serve SPP enrollees work closely with the community of safety net dental
 providers (which serve the majority of dental patients covered by Medicaid and MNCare). We
 are concerned that this proposal would negatively impact them and their ability to provide
 dental care to our members. We note that they oppose this proposal as well, as do the countybased plans.

We applaud the legislature for wanting to increase the reimbursement rates for dentists, which is the major barrier to more dentists wanting to serve people on public programs, but we do not think that this proposal accomplishes that goal. We are supportive of the other dental bills being heard today (restoring periodontal benefits, loan forgiveness and allowing dentists to administer COVID vaccines), and the bill recently introduced by Rep. Bierman to further simplify dental administration for safety net providers. We urge you to work on these proposals and oppose carving out the dental benefit from managed care.

Sincerely,

Lucas Nesse

President and CEO